

UNITED STATES DISTRICT COURT  
CENTRAL DISTRICT OF CALIFORNIA

## TRANSCRIPT ORDER FORM

Please use one form per court reporter per case, and contact court reporter directly immediately after e-filing form. (Additional instructions on next page.)

COURT USE ONLY

DUE DATE:

1a. Contact Person for this Order	CLINTON BROWN	2a. Contact Phone Number	310-487-6453	3a. Contact E-mail Address	clinton@atlasinc.solar
1b. Attorney Name (if different)		2b. Attorney Phone Number		3b. Attorney E-mail Address	
4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE)			5. Name & Role of Party Represented		
CLINTON BROWN 16821 Edgar Street Pacific Palisades, CA 90272			Plaintiff Pro Se		
			6. Case Name		
			Clinton Brown v. Clark R. Taylor, AICP, The Los Angeles County of Regional Planning		
			7a. District Court Case Number	2:22-cv-09203-MEMF-KS	7b. Appeals Court Case Number
					23-55160

8. INDICATE WHETHER PROCEEDING WAS (choose only one per form):

☒ DIGITALLY RECORDED☐ TRANSCRIBED BY A COURT REPORTER; NAME OF COURT REPORTER:9. THIS TRANSCRIPT ORDER IS FOR: ☒ Appeal ☐ Non-Appeal☐ Criminal ☒ Civil☐ CJA ☐ USA ☐ FPD ☐ In forma pauperis (Court order for transcripts must be attached)

10. TRANSCRIPT(S) REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested, format(s), and delivery type):

You MUST check the docket to see if the transcript has already been filed, and if so, provide the "Release of Transcript Restriction" date in column c, below.

a. HEARING(S) OR PORTIONS OF HEARINGS (Attach additional pages if necessary. If sealed, a court order releasing transcript to the ordering party must be attached here or emailed to transcripts\_cacd@cacd.uscourts.gov.)

b. SELECT FORMAT(S)

(CM/ECF access included with purchase of transcript.)

c. RELEASE OF TRANS. RESTRICTION DATE

d. DELIVERY TYPE

30-day, 14-day, 7-day, 3-day, Daily, Hourly

HEARING DATE	Minute Order Docket# (if available)	JUDGE (name)	PROCEEDING TYPE / PORTION If requesting less than full hearing, specify portion (e.g., witness or time). CJA orders: indicate if openings, closings, voir dire, or instructions requested.	PDF (email)	TEXT / ASCII (email)	PAPER	CONDENSED (email)	CM/ECF ACCESS (web)	WORD INDEXING	(Provide release date of efiled transcript, or check to certify none yet on file.)	(Check with court reporter before choosing any delivery time sooner than "Ordinary-30.")
09/25/2023	76	MEMF	TELEPHONIC DISCOVERY DISPUTE	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	ORDINARY (30-day) <input checked="" type="checkbox"/>
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>

11. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC. CJA Orders: Explain necessity of non-appeal orders, orders for transcripts of proceedings involving only a co-defendant, &amp; special authorizations to be requested in Section 14 of CJA-24 Voucher (attach additional pages if needed).

12. ORDER &amp; CERTIFICATION. By signing below, I certify that I will pay all charges (deposit plus additional), or, where applicable, promptly take all necessary steps to secure payment under the Criminal Justice Act.

Date 09/26/2023

Signature

